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STUDENT INFORMATION			
Student name:	Date of birth:		
Re-enrolling for what grade (circle): Presci	hool Jr. K Kdg 1st	t 2nd 3rd 4th	5th 6th 7th 8th
If applicable for Preschool (min. 3 half-days) or Jr.	Kdg/Kindergarten (mi	n. 5 half-days), cir	cle:
Monday: Full ½ No Tuesday: Full ½ No Wed	nesday: Full ½ No	Thursday: Full ½	2 No Friday: Full ½ No
PARENT INFORMATION			
Name:			
If guardian, what relationship (attach authoriz	zation):		
Address:			
Cell phone:	Email:		
Name:			
If guardian, what relationship (attach authoriz	zation):		
Address:			
Cell phone:	Email:		
ACADEMIC CONTRACT			
Students enrolled at Japhet School desire to attend and Japhet School believes that a positive and constructive v parent(s)/guardian(s) is essential to the accomplishment not renew a student's contract if the school reasonably of a positive and constructive relationship impossible or otherwise and purposes.	vorking relationship betw of Japhet's mission. Jap concludes that the action	reen the school and the het accordingly reserts of a student, and/c	the student and his/her rves the right to terminate or or parent/guardian, make such
We understand and agree to these requirements.			
Parent/Guardian signature:			Date:
Parent/Guardian signature:			Date:
Student signature, 1st-8th grade:			Date:

FINANCIAL CONTRACT

We agree to pay all charges, fees, etc. due for each student enrolled (see attachment). A deposit of \$475 per child is required with this contract to secure re-enrollment. A Tuition Payment Agreement will be sent from Japhet School prior to the beginning of the school year. If an enrolled student withdraws before June 1 (prior to the school year), the deposit is refundable. If the student withdraws after June 1, the deposit is non-refundable. Enrollment and tuition are for the entire school year, September to early June. Pro-ration or refund of any part of the annual tuition is determined based on extenuating circumstances and approved by the Head of School.

We agree to pay all charges, fees, etc. due for each student enrolled (see Tuition Schedule). Circle for each: We WILL or WILL NOT seek financial assistance. We WILL or WILL NOT seek a merit scholarship.

Parent/Guardian signature:	Date:
Parent/Guardian signature:	Date:

Enclosed (CIRCLE all that apply): \$100 \$475 Other: \$______; as Cash Check Charge my CC on file